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5(CHEDULE B (FEC Form 3X)	Use seperate schedule(s) for each category of the Detailed Summary Page		NUMBER: PAGE 7/7
IT	EMIZED DISBURSEMENTS		(check onl	y one) 22 X 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and State for commercial purposes, other than using the na			
\rangle	NAME OF COMMITTEE (In Full) WOMEN'S ACTION FOR NEW DIRECT	ONS INC (WAND)		
۹.	Full Name (Last, First, Middle Initial) Marlene Lynn Mailing Address 7725 Kelvinway Dr.			Transaction ID: SB23.4619 Date of Disbursement O 7 D 2 5 Y Y Y O O 6
	City Worthington Purpose of Disbursement Kilroy for Congress Candidate Name	State Zip Code OH 43085	011	Amount of Each Disbursement this Period 20.00
	Office Sought: House Disbur	sement For: 2006 K Primary General Other (specify)	Category/ Type	
	Sidie. DISTICL.			İ

SUBTOTAL of Disbursements This Page (optional)				•	•	20.00
TOTAL This Period (last page this line number only)	<u> </u>					20.00